

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.      | DATE     |
|---------------------------|----------|-------------|----------|
| FEE DETERMINATION         |          |             |          |
| O.I.P.E. CLASSIFIER       |          |             |          |
| FORMALITY REVIEW          | TA       | J. C. M. Y. | 11/24/01 |
| RESPONSE FORMALITY REVIEW | PA       | J. C. M. Y. | 02-13-02 |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim          | Date   |
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| Final Original |        |
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| Claim          | Date   |
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| Final Original |        |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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